

FORM INSP
Rev 05/11

**State of Colorado
Oil and Gas Conservation Commission**

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109



Inspection Date:
08/05/2016
Document Number:
685500378
Overall Inspection:
SATISFACTORY

FIELD INSPECTION FORM

| | | | | | |
|---------------------|---------------|---------------|----------------------|--------------------------|-------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection | 2A Doc Num: |
| | <u>208816</u> | <u>322020</u> | <u>MONTOYA, JOHN</u> | <input type="checkbox"/> | |

Operator Information:

OGCC Operator Number: 17320
Name of Operator: CITY & COUNTY OF DENVER
Address: 8500 PENA BLVD RM 9870
City: DENVER State: CO Zip: 80249

- THIS IS A FOLLOW UP INSPECTION
- FOLLOW UP INSPECTION REQUIRED
- NO FOLLOW UP INSPECTION REQUIRED
- INSPECTOR REQUESTS FORM 42 WHEN CORRECTIVE ACTIONS ARE COMPLETED

Contact Information:

| Contact Name | Phone | Email | Comment |
|-------------------|-------|--------------------------------|---------|
| Alonzo, Francisco | | francisco.alonzo@flydenver.com | |
| Koehler, Bob | | bob.koehler@state.co.us | |
| Burn, Diana | | diana.burn@state.co.us | |

Compliance Summary:

QtrQtr: NESW Sec: 7 Twp: 2S Range: 65W

| Insp. Date | Doc Num | Insp. Type | Insp Status | Satisfactory /Action Required | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|-------------------------------|----------|----------------|-----------------|
| 04/14/2016 | 673901404 | IJ | AC | SATISFACTORY | | | No |
| 07/13/2015 | 671104290 | IJ | AC | SATISFACTORY | | | No |
| 06/17/2014 | 671101569 | IJ | AC | SATISFACTORY | | | No |
| 06/20/2013 | 668300387 | IJ | SI | SATISFACTORY | P | | No |
| 08/02/2012 | 667600609 | IJ | IJ | SATISFACTORY | P | | No |
| 08/10/2011 | 200318431 | MI | SI | ACTION REQUIRED | | | Yes |
| 08/16/2010 | 200266769 | RT | AC | SATISFACTORY | | | No |
| 07/07/2009 | 200214805 | RT | AC | SATISFACTORY | | | No |
| 08/11/2008 | 200194032 | RT | AC | SATISFACTORY | | | No |
| 07/12/2007 | 200114631 | RT | AC | SATISFACTORY | | Pass | No |
| 08/18/2006 | 200095030 | RT | AO | SATISFACTORY | | Pass | No |
| 08/30/2005 | 200075867 | MI | AC | SATISFACTORY | | Pass | No |
| 08/05/2004 | 200057767 | RT | AC | SATISFACTORY | | Pass | No |
| 08/19/2003 | 200043000 | RT | AC | SATISFACTORY | | Pass | No |
| 06/26/2002 | 200028145 | RT | AC | SATISFACTORY | | Pass | No |
| 07/24/2001 | 1084297 | RT | AC | ACTION REQUIRED | | Fail | Yes |
| 09/08/2000 | 200009535 | MI | AC | SATISFACTORY | | Pass | No |

Inspector Comment:

Related Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|-----------------------|--------|-------------|------------|-----------|-------------------------|-------------|
| 150433 | UIC ENHANCED RECOVERY | CL | 04/25/2005 | | - | THIRD CREEK JSND WTRFLD | CL |
| 159132 | UIC ENHANCED RECOVERY | AC | 07/21/2005 | | - | THIRD CREEK WATERFLOOD | AC |
| 208816 | WELL | IJ | 09/14/2000 | ERIW | 031-06399 | CHAMPLIN 117 AMOCO A 2 | AC |

Equipment:

Location Inventory

| | | | |
|------------------------------|------------------------|---------------------|-------------------------|
| Special Purpose Pits: _____ | Drilling Pits: _____ | Wells: _____ | Production Pits: _____ |
| Condensate Tanks: _____ | Water Tanks: _____ | Separators: _____ | Electric Motors: _____ |
| Gas or Diesel Mortors: _____ | Cavity Pumps: _____ | LACT Unit: _____ | Pump Jacks: _____ |
| Electric Generators: _____ | Gas Pipeline: _____ | Oil Pipeline: _____ | Water Pipeline: _____ |
| Gas Compressors: _____ | VOC Combustor: _____ | Oil Tanks: _____ | Dehydrator Units: _____ |
| Multi-Well Pits: _____ | Pigging Station: _____ | Flare: _____ | Fuel Tanks: _____ |

Location

Lease Road:

| Type | Satisfactory/Action Required | comment | Corrective Action | Date |
|------|------------------------------|---------|-------------------|------|
| Main | SATISFACTORY | | | |

Signs/Marker:

| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
|----------|------------------------------|---------------------------------------|-------------------|---------|
| WELLHEAD | SATISFACTORY | SE CORNERN 39.53450W- 104.42510 | | |

Emergency Contact Number (S/AR): SATISFACTORY

Corrective Date: _____

Comment: _____

Corrective Action: _____

Good Housekeeping:

| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
|------|------------------------------|---------|-------------------|---------|
| | | | | |

Spills:

| Type | Area | Volume | Corrective action | CA Date |
|------|------|--------|-------------------|---------|
| | | | | |

Multiple Spills and Releases?

Fencing/:

| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
|------|------------------------------|---------|-------------------|---------|
| | | | | |

| | | | |
|--------------------------|-----|-------------------------------|--------------|
| Equipment: | | | |
| Type: Deadman # & Marked | # 4 | Satisfactory/Action Required: | SATISFACTORY |
| Comment | | | |
| Corrective Action | | | Date: |

| | |
|-----------------|----|
| Venting: | |
| Yes/No | NO |
| Comment | |

| | |
|--------------------|------------------------------|
| Flaring: | |
| Type | Satisfactory/Action Required |
| Comment: | |
| Corrective Action: | Correct Action Date: |

Predrill

Location ID: 208816

Lease Road Adeq.: _____ Pads: _____ Soil Stockpile: _____

S/AR: _____

Corrective Action: _____ Date: _____ CDP Num.: _____

Form 2A COAs:

S/AR: _____ **Comment:** _____

CA: _____ **Date:** _____

Wildlife BMPs:

S/AR: _____ **Comment:** _____

CA: _____ **Date:** _____

Comment: _____

Staking:

On Site Inspection (305):

Surface Owner Contact Information:

Name: _____ Address: _____

Phone Number: _____ Cell Phone: _____

Operator Rep. Contact Information:

Landman Name: _____ Phone Number: _____

Date Onsite Request Received: _____ Date of Rule 306 Consultation: _____

Request LGD Attendance: _____

LGD Contact Information:

Name: _____ Phone Number: _____ Agreed to Attend: _____

Summary of Landowner Issues:

Summary of Operator Response to Landowner Issues:

Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:

Facility

Facility ID: 208816 Type: WELL API Number: 031-06399 Status: IJ Insp. Status: AC

Underground Injection Control

UIC Violation: _____ Maximum Injection Pressure: _____

UIC Routine

Inj./Tube: Pressure or inches of Hg _____ Previous Test Pressure _____ MPP _____
(e.g. 30 psig or -30" Hg) Inj Zone: JSND
TC: Pressure or inches of Hg _____ Previous Test Pressure _____ Last MIT: 08/02/2012
Brhd: Pressure or inches of Hg _____ Previous Test Pressure _____ AnnMTRReq: _____

Comment: **START WITH PUMP THEN WELL WILL GRAVITY FEED ON IT'S OWN**

Method of Injection: PUMP FEED

Test Type: 5 Year Tbg psi: 0 Csg psi: 0 BH psi: _____

Insp. Status: Pass

Comment: **START 600 PSI, 5 MIN 600 PSI, 10 MIN 600 PSI, 15 MIN 600 PSI, -0 PASSED**

BradenHead

Comment: **BRADWENHEAD PLUMBED TO SURFACE**

CA: _____

CA Date: _____

Environmental

Spills/Releases:

Type of Spill: _____ Description: _____ Estimated Spill Volume: _____

Comment: _____

Corrective Action: _____ Date: _____

Reportable: _____ GPS: Lat _____ Long _____

Proximity to Surface Water: _____ Depth to Ground Water: _____

Water Well:

DWR Receipt Num: _____ Owner Name: _____ GPS : _____ Lat _____ Long _____

Field Parameters:

Sample Location: _____

Emission Control Burner (ECB): _____

Comment: _____

Pilot: _____ Wildlife Protection Devices (fired vessels): _____

Reclamation - Storm Water - Pit

Interim Reclamation:

Date Interim Reclamation Started: _____ Date Interim Reclamation Completed: _____

Land Use: _____

Comment: _____

1003a. Waste and Debris removed? _____
 CM _____
 CA _____ CA Date _____

Unused or unneeded equipment onsite? _____
 CM _____
 CA _____ CA Date _____

Pit, cellars, rat holes and other bores closed? _____
 CM _____
 CA _____ CA Date _____

Guy line anchors marked? _____
 CM _____
 CA _____ CA Date _____

1003b. Area no longer in use? _____ Production areas stabilized ? _____

1003c. Compacted areas have been cross ripped? _____

1003d. Drilling pit closed? _____ Subsidence over on drill pit? _____
 Cuttings management: _____

1003e. Areas no longer needed for drilling or subsequent operations for have been re-vegetated to 80% of pre-existing? _____
 Production areas have been stabilized? _____ Segregated soils have been replaced? _____

RESTORATION AND REVEGETATION

Cropland

Top soil replaced _____ Recontoured _____ Perennial forage re-established _____

Non-Cropland

Top soil replaced _____ Recontoured _____ 80% Revegetation _____

1003 f. Weeds Noxious weeds? _____
 Comment: _____

Overall Interim Reclamation _____

Final Reclamation/ Abandoned Location:

Date Final Reclamation Started: _____ Date Final Reclamation Completed: _____

Final Land Use: _____

Reminder: _____

Comment: _____

Well plugged _____ Pit mouse/rat holes, cellars backfilled _____

Debris removed _____ No disturbance /Location never built _____

Access Roads Regraded _____ Contoured _____ Culverts removed _____

Gravel removed _____

Location and associated production facilities reclaimed _____ Locations, facilities, roads, recontoured _____

Compaction alleviation _____ Dust and erosion control _____

Non cropland: Revegetated 80% _____ Cropland: perennial forage _____

Weeds present _____ Subsidence _____

Comment: _____

Corrective Action: Date

Overall Final Reclamation Well Release on Active Location Multi-Well Location

| Storm Water: | | | | | | |
|---------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| Loc Erosion BMPs | BMP Maintenance | Lease Road Erosion BMPs | Lease BMP Maintenance | Chemical BMPs | Chemical BMP Maintenance | Comment |
| | | | | | | |

S/A/V: Corrective Date:

Comment:

CA:

Pits: NO SURFACE INDICATION OF PIT

| COGCC Comments | | |
|-----------------------|----------|------------|
| Comment | User | Date |
| UIC AND MIT TEST | montoyaj | 08/05/2016 |